02/01/2007 ZJUHAR1 00000054 080219 10765921

PTO/SB/22 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
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PETITION FOR EXTENSION OF TIME UNDER 37 CI FY 2006	Docket Number (Optional) 007733 USA/FPS/MMCS/APC								
(Fees pursuant to the Consolidated Appropriations Act, 2005	0107262.00181US1								
Application Number 10/765,921-Conf. #26	ication Number 10/765,921-Conf. #2673		nuary 29, 2004						
For SYSTEM, METHOD, AND MEDIUM FOR MONITORING PERFORMANCE OF AN ADVANCED PROCESS CONTROL SYSTEM									
Art Unit 2125	Art Unit 2125		S. P. Shechtman						
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):									
X One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$ 120.00						
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$						
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$						
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$						
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$						
Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  X The Director has already been authorized to charge fees in this application to a Deposit Account.  X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-0219 . I have enclosed a duplicate copy of this sheet.									
applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent of record. Registration Number 57,725  attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34									
Ketan Kadrwala	January 26, 2007								
Signature		Date							
Ketan Kadiwala Typed or printed name		202.663.6000 / Telephone Number							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
Total of 1 forms are submitted									

PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032

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	Effective on 12/08/	2004	Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Nu	Application Number 10		10/765,921-Conf. #2673				
FEE TRANSMITTAL		Filing Date		January 29, 2004					
For FY 2006		First Named In		Alexander T. SCHWARM					
TOFF1 2000		Examiner Nam	Examiner Name S.		S. P. Shechtman				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit	Art Unit 21:		2125				
TOTAL AMOUNT OF PAYMENT (\$) 120.00		Attomey Docke			007733 USA/FPS/MMCS/APC 0107262.00181US1				
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 08-0219 Deposit Account Name: Wilmer Cutler Pickering Hale and Dorr LLP									
For the	above-identified depo	sit account, the Director	is hereby authoriz	zed to: (chec	k all that apply)				
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of Credit any overpayments									
FEE CALCULATION									
	G, SEARCH, AND E	XAMINATION FEES		_					
i. DAGIOTILII			EARCH FEES	EXAMIN	IATION FEES				
A		Small Entity	Small Entity	<u>.</u>	<b>Small Entity</b>				
Application T				Fee (\$)	Fee (\$)	Fees Pa	aid (\$)		
Utility Decim	300	150 500		200	100				
Design	200	100 100		130	65				
Plant	200	100 300		160	80				
Reissue	300	150 500		600	300				
Provisional	200	100	0	0	0				
2. EXCESS CLA Fee Description	· -					Fee (\$)	Fee (\$)		
	r 20 (including Reiss	ues)				50	25		
Each independent claim over 3 (including Reissues)  200						100			
Multiple depend	•	ading recodes,				360	180		
Total Claims	Extra Claims	Fee (\$) Fee	Paid (\$)	Paid (\$) Mul		Dependent Claims			
	-=			· · · · · · · · · · · · · · · · · · ·	e (\$) Fee Paid (\$)				
HP = highest num	ber of total claims paid for	, if greater than 20.					_		
Indep. Claims	Extra Claims	Fee (\$) Fee	Paid (\$)						
LD = highest number of independent claims exist for if greater than 2									
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheet			additional 50 or fra		Fee (\$)	Fee Pa	aid (\$)		
- 100 = /50 (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)						aid (\$)			
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00									
SUBMITTED BY									
Signature	Ketan Ko	divala	Registration No. (Attorney/Agent)	57,725	Telephone	202.663.	6000		
Name (Print/Type)	Ketan Kadiwala				Date	January 26	, 2007		